



Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060  
(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case # <b>10000</b>		Accompanying Reports: <input checked="" type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>1</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2310</b>		Address <b>NE</b>		Street <b>22nd</b>		Unit #		City <b>PD</b>		State <b>OR</b>		Zip <b>97220</b>	
Person Code V - Victim O - Owner S - Suspect F - Finder U - Other													
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes**

C - Confiscated O - Other

E - Evidence

**Dispo Codes**

H - Hold C - Crime Lab P - Digital Photo

R - Release to Owner D - Destroy

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
1	C R O E	1	F Terrier		TAN		H C P R D	
2	C R O E	1	DSH <del>torch</del>		torch		H C P R D	
3	C R O E	1	DSH, M		gray		H C P R D	
4	C R O E	1	DSH, M		gray		H C P R D	
5	C R O E	1	DSH, F		org		H C P R D	
6	C R O E	1	DSH, M		org		H C P R D	
7	C R O E	1	DSH, F		torbi		H C P R D	
8	C R O E	1	DSH, F		blk/wh		H C P R D	
9	C R O E	1	DSH, M				H C P R D	

Narrative: \_\_\_\_\_

Reporting ACO <b>Wammal</b>	DPSST # <b>10000</b>	Date <b>8/11/2020</b>	Time <b>1:00</b>
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PROPERTY IS RELEASED BY APPOINTMENT ONLY

CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

White-Property Copy

Pink-Inspections

Canary-File Copy

Goldenrod-Receipt Copy

Property Evidence Report: October 2012

Exhibit A  
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MCAS Case # <b>254895</b>		Law Enforcement Case #		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>2</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>230</b>		Address <b>NE 82nd</b>		Street		Unit #		City <b>POX</b>		State <b>OR</b>		Zip <b>97220</b>	
Person Code V - Victim O - Owner S - Suspect F - Finder U - Other													
Code:		No.		Last Name <b>Wooden</b>		First <b>Palora</b>		Middle <b>Lee</b>		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes**

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E - Evidence

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H - Hold C - Crime Lab P - Digital Photo

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Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
<b>10</b>	C R O E	<b>1</b>	<b>DSH, M</b>		<b>brwn tabby</b>		<b>H C P R D</b>	
<b>11</b>	C R O E	<b>1</b>	<b>DSH, M</b>		<b>brwn tabby</b>		<b>H C P R D</b>	
<b>12</b>	C R O E	<b>1</b>	<b>DSH, M</b>		<b>grey</b>		<b>H C P R D</b>	
<b>13</b>	C R O E	<b>1</b>	<b>DSH, F</b>		<b>torti</b>		<b>H C P R D</b>	
<b>14</b>	C R O E	<b>1</b>	<b>DSH, F</b>		<b>grey</b>		<b>H C P R D</b>	
<b>15</b>	C R O E	<b>1</b>	<b>DSH, M</b>		<b>grey white</b>		<b>H C P R D</b>	
<b>16</b>	C R O E	<b>1</b>	<b>DSH, F</b>		<b>brwn tabby</b>		<b>H C P R D</b>	
<b>17</b>	C R O E	<b>1</b>	<b>DSH, M</b>		<b>grey tabby</b>		<b>H C P R D</b>	
<b>18</b>	C R O E	<b>1</b>	<b>DSH, F</b>		<b>torti</b>		<b>H C P R D</b>	

Narrative: \_\_\_\_\_

Reporting ACO <b>[Signature]</b>	DPSST # <b>Deed</b>	Date <b>9/11/2020</b>	Time <b>1800</b>
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PROPERTY IS RELEASED BY APPOINTMENT ONLY

CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

White-Property Copy

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Goldenrod-Receipt Copy

Property Evidence Report: October 2012

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(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case #		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>3</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2310 NE 82nd</b>		Address		Street		Unit #		City <b>PDY OR</b>		State		Zip <b>97220</b>	
Person Code V - Victim O - Owner S - Suspect F - Finder U - Other													
Code:		No.		Last Name <b>WOOGN</b>		First <b>Palooza</b>		Middle <b>LLC</b>		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes**

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Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
<b>19</b>	C R O E	1	DSH, M		blk		H C P R D	
<b>20</b>	C R O E	1	DMH, M		grey		H C P R D	
<b>21</b>	C R O E	1	DMH, F		grey & wht		H C P R D	
<b>22</b>	C R O E	1	DSH, M		white & black		H C P R D	
<b>23</b>	C R O E	1	DSH, F		grey & white		H C P R D	
<b>24</b>	C R O E	1	DMH, M		org & white		H C P R D	
<b>25</b>	C R O E	1	DSH, F		grey & wht		H C P R D	
<b>26</b>	C R O E	1	DSH, F		grey & wht		H C P R D	
<b>27</b>	C R O E	1	DSH, F		brwn tabby		H C P R D	

Narrative: \_\_\_\_\_

Reporting ACO <b>AR</b>	DPSST # <b>AR</b>	Date <b>11/17/20</b>	Time <b>1:39</b>
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CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

White-Property Copy

Pink-Inspections

Canary-File Copy

Goldenrod-Receipt Copy

Property Evidence Report: October 2012



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MCAS Case # <b>254895</b>		Law Enforcement Case #		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>4</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2310 NE 82nd</b>		Address		Street		Unit #		City <b>Portland</b>		State <b>OR</b>		Zip <b>97220</b>	
Person Code V - Victim O - Owner S - Suspect F - Finder U - Other													
Code:		No.		Last Name <b>WOODFIN</b>		First <b>Palooza</b>		Middle <b>LLC</b>		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes**

C - Confiscated O - Other

E - Evidence

**Dispo Codes**

H - Hold C - Crime Lab P - Digital Photo

R - Release to Owner D - Destroy

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
<b>128</b>	C R O E	1	DSH, F		white brown		H C P R D	
<b>129</b>	C R O E	1	DSH, M		Brown Tabby		H C P R D	
<b>130</b>	C R O E	1	DSH, F		BL & W		H C P R D	
<b>131</b>	C R O E	1	DSH, M		Brown Tabby		H C P R D	
<b>132</b>	C R O E	1	DSH, M		BL / WH		H C P R D	
<b>133</b>	C R O E	1	DSH, F		WH GR		H C P R D	
<b>134</b>	C R O E	1	DSH, F		Black		H C P R D	
<b>135</b>	C R O E	1	DSH, F		BL Tabby		H C P R D	
<b>136</b>	C R O E	1	DSH, F		Brz Tabby		H C P R D	

Narrative: \_\_\_\_\_

Reporting ACO <b>(2) AB</b>	DPSST # <b>Amal</b>	Date <b>8/11/2020</b>	Time <b>5:00</b>
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PROPERTY IS RELEASED BY APPOINTMENT ONLY

CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

White-Property Copy

Pink-Inspections

Canary-File Copy

Goldenrod-Receipt Copy

Property Evidence Report: October 2012

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Dept of Community Services

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(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case #		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>5</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2310</b>		Address <b>NE</b>		Street <b>82nd</b>		Unit #		City <b>Portland</b>		State <b>OR</b>		Zip <b>97220</b>	
Person Code <input type="checkbox"/> V - Victim <input type="checkbox"/> O - Owner <input type="checkbox"/> S - Suspect <input type="checkbox"/> F - Finder <input type="checkbox"/> U - Other													
Code:		No.		Last Name <b>Wooten</b>		First <b>Palouza</b>		Middle <b>LLC</b>		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes**

C - Confiscated O - Other

E - Evidence

**Dispo Codes**

H - Hold C - Crime Lab P - Digital Photo

R - Release to Owner D - Destroy

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
<del>37</del>	C R O E	1	DSH, F		BL		H C P R D	
<del>38</del>	C R O E	1	DSH, M		B/W		H C P R D	
<del>39</del>	C R O E	1	DSH, F		B/M		H C P R D	
<del>40</del>	C R O E	1	DSH, F		BL		H C P R D	
<del>41</del>	C R O E	1	DSH, M		BL		H C P R D	
<del>42</del>	C R O E	1	DSH, M		tuX		H C P R D	
<del>43</del>	C R O E	1	DSH, F		tori		H C P R D	
<del>44</del>	C R O E	1	DSH, M		b/k		H C P R D	
<del>45</del>	C R O E	1	DSH, F		grey		H C P R D	

Narrative: \_\_\_\_\_

Reporting ACO <b>AS</b>	DPSST # <b>1234</b>	Date <b>11/11/2020</b>	Time <b>1:00</b>
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Goldenrod-Receipt Copy

Property Evidence Report: October 2012

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(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case #		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>6</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2310</b>		Address <b>NE</b>		Street <b>82nd</b>		Unit #		City <b>PDx</b>		State <b>OR</b>		Zip <b>97220</b>	
Person Code V - Victim O - Owner S - Suspect F - Finder U - Other													
Code:		No.		Last Name <b>Woofin</b>		First <b>Palooza</b>		Middle <b>LLC</b>		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes**

C - Confiscated O - Other

E - Evidence

**Dispo Codes**

H - Hold C - Crime Lab P - Digital Photo

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Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
<b>46</b>	C R O E	<b>1</b>	<b>DSH, M</b>		<b>tux</b>		<b>H C P R D</b>	
<b>47</b>	C R O E	<b>1</b>	<b>DSH, F</b>		<b>blk &amp; wht</b>		<b>H C P R D</b>	
<b>48</b>	C R O E	<b>1</b>	<b>DSH, F</b>		<b>blk</b>		<b>H C P R D</b>	
<b>49</b>	C R O E	<b>1</b>	<b>DSH, M</b>		<b>brwn tabby</b>		<b>H C P R D</b>	
<b>50</b>	C R O E	<b>1</b>	<b>DSH, F</b>		<b>calico</b>		<b>H C P R D</b>	
<b>51</b>	C R O E	<b>1</b>	<b>DLH, F</b>		<b>blk &amp; wht</b>		<b>H C P R D</b>	
<b>52</b>	C R O E	<b>1</b>	<b>DSH, M</b>		<b>brwn tabby</b>		<b>H C P R D</b>	
<b>53</b>	C R O E	<b>1</b>	<b>DSH, F</b>		<b>torti</b>		<b>H C P R D</b>	
<b>54</b>	C R O E	<b>1</b>	<b>DSH, F</b>		<b>torti</b>		<b>H C P R D</b>	

Narrative: \_\_\_\_\_

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Reporting ACO <b>AR</b>	DPSST # <b>1001</b>	Date <b>8/11/2020</b>	Time <b>1800</b>
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Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2310</b>		Address <b>NE</b>		Street <b>82nd</b>		Unit #		City <b>PDx</b>		State <b>OR</b>		Zip <b>97220</b>	
Person Code V - Victim O - Owner S - Suspect F - Finder U - Other													
Code:		No.		Last Name <b>Wootin</b>		First <b>Palooza</b>		Middle <b>LLC</b>		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

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Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
<b>155</b>	C R O E	<b>1</b>	<b>DSH, M</b>		<b>grey</b>		<b>H C P R D</b>	
<b>156</b>	C R O E	<b>1</b>	<b>DSH, M</b>		<b>lynx tabby</b>		<b>H C P R D</b>	
<b>157</b>	C R O E	<b>1</b>	<b>DSH, M</b>		<b>blk</b>		<b>H C P R D</b>	
<b>158</b>	C R O E	<b>1</b>	<b>DSH, F</b>		<b>brwn &amp; wht</b>		<b>H C P R D</b>	
<b>159</b>	C R O E	<b>1</b>	<b>DSH, M</b>		<b>org</b>		<b>H C P R D</b>	
<b>160</b>	C R O E	<b>1</b>	<b>DSH, unknown</b>		<b>brwn tabby</b>		<b>H C P R D</b>	
<b>161</b>	C R O E	<b>1</b>	<b>DSH, F</b>		<b>blk &amp; wht</b>		<b>H C P R D</b>	
<b>162</b>	C R O E	<b>1</b>	<b>DMH, F</b>		<b>grey &amp; wht</b>		<b>H C P R D</b>	
<b>163</b>	C R O E	<b>1</b>	<b>DLH, F</b>		<b>buff wht</b>		<b>H C P R D</b>	

Narrative: \_\_\_\_\_

Reporting ACO <b>[Signature]</b>	DPSST # <b>10009</b>	Date <b>11/1/2020</b>	Time <b>1:00</b>
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Incident Type	Receipt #	Report Date	Report Time	Occurred Date	Occurred Time	Source
Location <b>2310</b>	Address <b>NE</b>	Street <b>82nd</b>	Unit #	City <b>PDX</b>	State <b>OR</b>	Zip <b>97220</b>
Person Code V - Victim O - Owner S - Suspect F - Finder U - Other						
Code:	No.	Last Name <b>Wootin</b>	First <b>Palanza</b>	Middle <b>LLC</b>	DOB	Sex
Address		Street	Unit #	City	State	Zip
Code:	No.	Last Name	First	Middle	DOB	Sex
Address		Street	Unit #	City	State	Zip
Code:	No.	Last Name	First	Middle	DOB	Sex
Address		Street	Unit #	City	State	Zip

**Property Type Codes**

C - Confiscated O - Other

E - Evidence

**Dispo Codes**

H - Hold C - Crime Lab P - Digital Photo

R - Release to Owner D - Destroy

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
<b>64</b>	C R O E	1	DSH, M		blk		H C P R D	
<b>65</b>	C R O E	1	DMH, F		torti		H C P R D	
<b>66</b>	C R O E	1	DSH, M		tux		H C P R D	
<b>67</b>	C R O E	1	Am Pit Bull Terr X, adult male		wht		H C P R D	
<b>68</b>	C R O E	1	Am Pit Bull Terr X, adult female		wht & brwn		H C P R D	
<b>69</b>	C R O E	1	small black puppy		blk		H C P R D	
<b>70</b>	C R O E	1	brwn & white Chit adult male		brwn white		H C P R D	
<b>71</b>	C R O E	1	Terrier X, adult male		grey		H C P R D	
<b>72</b>	C R O E	1	Akita adult female		tan wht		H C P R D	

Narrative: \_\_\_\_\_

Reporting ACO <b>[Signature]</b>	DPSST # <b>[Signature]</b>	Date <b>8/11/2020</b>	Time <b>1800</b>
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PROPERTY IS RELEASED BY APPOINTMENT ONLY

CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

White-Property Copy

Pink-Inspections

Canary-File Copy

Goldenrod-Receipt Copy

Property Evidence Report: October 2012

Exhibit A  
Page 8 of 21





Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060  
(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case #		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>9</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2310</b>		Address <b>NE 82nd St</b>		Street		Unit #		City <b>Portland</b>		State <b>OR</b>		Zip <b>97220</b>	
Person Code <input checked="" type="checkbox"/> V - Victim <input type="checkbox"/> O - Owner <input type="checkbox"/> S - Suspect <input type="checkbox"/> F - Finder <input type="checkbox"/> U - Other													
Code:		No.		Last Name <b>WOOFIN</b>		First <b>PALOOZA</b>		Middle <b>LLC</b>		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes**

C - Confiscated O - Other

E - Evidence

**Dispo Codes**

H - Hold C - Crime Lab P - Digital Photo

R - Release to Owner D - Destroy

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
<b>173</b>	C R O E	1	mini Pood X adult fem.		whit		H C P R D	
<b>274</b>	C R O E	1	Scottie adult male		blk		H C P R D	
<b>75</b>	C R O E	1	Chi X blk & tan adult fem.		blk & tan		H C P R D	
<b>76</b>	C R O E	1	Terrier X adult female		grey & wht		H C P R D	
<b>77</b>	C R O E	1	Toy Poodle adult male		blk		H C P R D	
<b>78</b>	C R O E	1	Scottie adult		blk		H C P R D	
<b>78</b>	C R O E	1	American Shetland Dog mix, adult		grey & wht		H C P R D	
<b>80</b>	C R O E	1	large puppy, male		grey & black		H C P R D	
<b>81</b>	C R O E	1	Chi X Terr adult female		cream		H C P R D	

Narrative: \_\_\_\_\_

Reporting ACO <b>AR</b>	DPSST # <b>11-2070</b>	Date <b>8/11/2020</b>	Time <b>1800</b>
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PROPERTY IS RELEASED BY APPOINTMENT ONLY

CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

White-Property Copy

Pink-Inspections

Canary-File Copy

Goldenrod-Receipt Copy

Property Evidence Report: October 2012



Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060

(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case #		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>10</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2310</b>		Address <b>NE</b>		Street <b>82nd St</b>		Unit #		City <b>Portland</b>		State <b>OR</b>		Zip <b>97220</b>	
Person Code <b>V - Victim</b> <b>O - Owner</b> <b>S - Suspect</b> <b>F - Finder</b> <b>U - Other</b>													
Code:		No.		Last Name		First		Middle		DOB		Sex	
				<b>WOODFIN</b>		<b>PALOOZA</b>		<b>LLC</b>					
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes****C - Confiscated** **O - Other****E - Evidence****Dispo Codes****H - Hold** **C - Crime Lab** **P - Digital Photo****R - Release to Owner** **D - Destroy**

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
<b>182</b>	<b>C R O E</b>	<b>1</b>	<b>Am Pit Bull Ter</b> <sup>adult</sup> <sub>female</sub>		<b>white / brindle</b>		<b>H C P R D</b>	
<b>183</b>	<b>C R O E</b>	<b>1</b>	<b>Terrier Puppy</b>		<b>Brown</b> <del>Black</del>		<b>H C P R D</b>	
<b>184</b>	<b>C R O E</b>	<b>1</b>	<b>Terrier Puppy</b>		<b>Black</b> <del>Brown</del>		<b>H C P R D</b>	
<b>185</b>	<b>C R O E</b>	<b>1</b>	<b>Terrier Puppy</b>		<b>Tan</b>		<b>H C P R D</b>	
<b>186</b>	<b>C R O E</b>	<b>1</b>	<b>Chihuahua Puppy</b>		<b>Black</b>		<b>H C P R D</b>	
<b>187</b>	<b>C R O E</b>	<b>1</b>	<b>Terrier puppy</b>		<b>Light brown</b>		<b>H C P R D</b>	
<b>188</b>	<b>C R O E</b>	<b>1</b>	<b>Terrier puppy F</b>		<b>Brown</b>		<b>H C P R D</b>	
<b>189</b>	<b>C R O E</b>	<b>1</b>	<b>Terrier puppy F</b>		<b>Brown</b>		<b>H C P R D</b>	
<b>190</b>	<b>C R O E</b>	<b>1</b>	<b>Terrier puppy M</b>		<b>Brown</b>		<b>H C P R D</b>	

Narrative: \_\_\_\_\_

Reporting ACO <b>DR</b>	DPSST # <b>1000</b>	Date <b>8/11/2020</b>	Time <b>8:00</b>
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PROPERTY IS RELEASED BY APPOINTMENT ONLY

CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

White-Property Copy

Pink-Inspections

Canary-File Copy

Goldenrod-Receipt Copy

Property Evidence Report: October 2012

Exhibit A  
Page 10 of 21



Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060  
(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case #	Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA	Page # <b>11</b>
Incident Type	Receipt #	Report Date	Report Time	Occurred Date	Occurred Time	Source
Location Address Street <b>2310 NE 82nd St</b> City <b>Portland</b> State <b>OR</b> Zip <b>97220</b>						
Person Code <b>V - Victim</b> <b>O - Owner</b> <b>S - Suspect</b> <b>F - Finder</b> <b>U - Other</b>						
Code:	No.	Last Name <b>WOODFIN PALOOZA LLC</b> First Middle			DOB	Sex
Address		Street	Unit #	City	State	Zip
Code:	No.	Last Name <b>WOODFIN PALOOZA LLC</b> First Middle			DOB	Sex
Address		Street	Unit #	City	State	Zip

**Property Type Codes****C - Confiscated** **O - Other****E - Evidence****Dispo Codes****H - Hold** **C - Crime Lab** **P - Digital Photo****R - Release to Owner** **D - Destroy**

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
<b>91</b>	<b>C R O E</b>		<b>Adult Husky, white, m</b>		<b>White</b>		<b>H C P R D</b>	
<b>92</b>	<b>C R O E</b>		<b>Spaniel, Puppy, m</b>		<b>Tan</b>		<b>H C P R D</b>	
<b>93</b>	<b>C R O E</b>		<b>Mastiff, Adult + m</b>		<b>Dark brown</b>		<b>H C P R D</b>	
<b>94</b>	<b>C R O E</b>		<b>Terrier, Adult, F</b>		<b>Tan</b>		<b>H C P R D</b>	
<b>95</b>	<b>C R O E</b>		<b>Terrier, Adult, F</b>		<b>White</b>		<b>H C P R D</b>	
<b>96</b>	<b>C R O E</b>		<b>Terrier, puppy, m</b>		<b>Tan white</b>		<b>H C P R D</b>	
<b>97</b>	<b>C R O E</b>		<b>Terrier, puppy, F</b>		<b>Tan white</b>		<b>H C P R D</b>	
<b>98</b>	<b>C R O E</b>		<b>Terrier, adult, F</b>		<b>White, black</b>		<b>H C P R D</b>	
<b>99</b>	<b>C R O E</b>		<b>Shepherd, adult, m light brown</b>		<b>Light brown</b>		<b>H C P R D</b>	

Narrative: \_\_\_\_\_

Reporting ACO <b>DR</b>	DPSST # <b>Acad</b>	Date <b>8/11/2011</b>	Time <b>13:4</b>
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PROPERTY IS RELEASED BY APPOINTMENT ONLY

CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

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Goldenrod-Receipt Copy

Property Evidence Report: October 2012

Exhibit A  
Page 11 of 21





Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060  
(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case #		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>12</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2310</b>		Address <b>NE</b>		Street <b>82nd</b>		Unit # <b>ST</b>		City <b>Portland</b>		State <b>OR</b>		Zip <b>97220</b>	
Person Code V - Victim O - Owner S - Suspect F - Finder U - Other													
Code:		No.		Last Name <b>WOODFIN</b>		First <b>PALOOZA</b>		Middle <b>LLC</b>		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes**

C - Confiscated O - Other

E - Evidence

**Dispo Codes**

H - Hold C - Crime Lab P - Digital Photo

R - Release to Owner D - Destroy

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
<b>1</b> <b>100</b>	C R O E		Husky, adult, M		white/black		H C P R D	
<b>2</b> <b>101</b>	C R O E		Lab, adult, M		chocolate		H C P R D	
<b>3</b> <b>102</b>	C R O E		German Shep, adult, F		Brown		H C P R D	
<b>4</b> <b>103</b>	C R O E		German Shepherd, Puppy, M		Brown white		H C P R D	
<b>5</b> <b>104</b>	C R O E		German Shepherd, Puppy, F		Brown white		H C P R D	
<b>6</b> <b>105</b>	C R O E		German Shep, puppy, F		Brown white		H C P R D	
<b>7</b> <b>106</b>	C R O E		German Shep, puppy, F		white/brown		H C P R D	
<b>8</b> <b>107</b>	C R O E		German Shep, puppy, F		white/brown		H C P R D	
<b>9</b> <b>108</b>	C R O E		German Shep, puppy, M		white/brown		H C P R D	

Narrative: \_\_\_\_\_

Reporting ACO <b>AD</b>	DPSST # <b>AD</b>	Date <b>8/11/2021</b>	Time <b>12:00</b>
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PROPERTY IS RELEASED BY APPOINTMENT ONLY

CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

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Canary-File Copy

Goldenrod-Receipt Copy

Property Evidence Report: October 2012



Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060  
(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case #		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>13</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2310 NE 82nd Ave</b>		Address <b>NE 82nd Ave</b>		Street <b>Ave</b>		Unit #		City <b>Portland</b>		State <b>OR</b>		Zip <b>97220</b>	
Person Code <b>V - Victim</b>		<b>O - Owner</b>		<b>S - Suspect</b>		<b>F - Finder</b>		<b>U - Other</b>					
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes****C - Confiscated O - Other****E - Evidence****Dispo Codes****H - Hold C - Crime Lab P - Digital Photo****R - Release to Owner D - Destroy**

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
<b>109</b>	C R O E		German Shep, puppy, male		Brown, black		H C P R D	
<b>110</b>	C R O E		Am Pit Bull, adult, male		white, light brown		H C P R D	
<b>111</b>	C R O E		Lab, adult, male		Black		H C P R D	
<b>112</b>	C R O E		Am Pit Bull, adult, M		Brindle		H C P R D	
<b>113</b>	C R O E		Husky, adult, male		Black/white		H C P R D	
<b>114</b>	C R O E		German Shep, adult, M		Brown		H C P R D	
<b>115</b>	C R O E		Am Pit Bull, adult, M		Brown		H C P R D	
<b>116</b>	C R O E		German Shep, adult, M		Brown		H C P R D	
<b>117</b>	C R O E		German Shep, adult, F		Brown		H C P R D	

Narrative: \_\_\_\_\_

Reporting ACO <b>DR</b>	DPSST # <b>1008</b>	Date <b>11/12/20</b>	Time <b>1800</b>
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PROPERTY IS RELEASED BY APPOINTMENT ONLY

CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

White-Property Copy

Pink-Inspections

Canary-File Copy

Goldenrod-Receipt Copy

Property Evidence Report: October 2012

Exhibit A  
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Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060  
(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254 995</b>		Law Enforcement Case # <b>40400</b>		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>1</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location		Address		Street		Unit #		City		State		Zip	
		<b>2310 NE 82nd Ave</b>						<b>Portland</b>		<b>OR</b>		<b>97220</b>	
Person Code <b>V - Victim</b> <b>O - Owner</b> <b>S - Suspect</b> <b>F - Finder</b> <b>U - Other</b>													
Code:		No.		Last Name		First		Middle		DOB		Sex	
				<b>Wafin Palooza</b>									
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

## Property Type Codes

C - Confiscated O - Other

E - Evidence

## Dispo Codes

H - Hold C - Crime Lab P - Digital Photo

R - Release to Owner D - Destroy

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
1	C R O E	1	#A110803 moved to PETS PETZ Video Recorder	LA view		LV-N9516DBE-T3 1EA1008454x00245	H C P R D	
1-2	C R O E	1	Fluoxetine 1 labeled HCL bottle			Open dog area	H C P R D	Bag 1
1-3	C R O E	1	Carprofen 1 labeled prescription bottle			Open dog area	H C P R D	Bag 1
1-4	C R O E	1	Acepromazine prescription bottle			Open dog area	H C P R D	Bag 1
1-5	C R O E	1	Meloxicam prescription, 3 syringes			Open dog area	H C P R D	Bag 1
1-6	C R O E	1	Kimnodyl prescription, 3 chewables			Open dog area	H C P R D	Bag 1
1-7	C R O E	1	Prescription topical - Terramycin			Open dog area	H C P R D	Bag 2
1-8	C R O E	1	Prescription topical - Otomax			Open dog area	H C P R D	Bag 2
1-9	C R O E	1	Prescription topical - Erythromycin			Open dog area	H C P R D	Bag 2

Narrative: \_\_\_\_\_

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Reporting ACO <b>BU DE</b>	DPSST # <b>A1009</b>	Date <b>8/11/2020</b>	Time <b>1800</b>
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PROPERTY IS RELEASED BY APPOINTMENT ONLY

CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

White-Property Copy

Pink-Inspections

Canary-File Copy

Goldenrod-Receipt Copy

Property Evidence Report: October 2012

Exhibit A  
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Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060  
(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case # <b>40400</b>		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>2</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location		Address		Street		Unit #		City		State		Zip	
		<b>2310 NE 82nd Ave</b>						<b>Portland</b>		<b>OR</b>		<b>97220</b>	
Person Code <b>V - Victim</b> <b>O - Owner</b> <b>S - Suspect</b> <b>F - Finder</b> <b>U - Other</b>													
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes****C - Confiscated** **O - Other****E - Evidence****Dispo Codes****H - Hold** **C - Crime Lab** **P - Digital Photo****R - Release to Owner** **D - Destroy**

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
1	C R O E		Reception folders		Multi		H C P R D	2
2	C R O E		Desk files / folders		Multi		H C P R D	2
3	C R O E		Hanging files - Reception				H C P R D	2
2-4	C R O E		Storage - files		Blue crate		H C P R D	via 4 cr
2-5	C R O E		Storage - files		Green crate		H C P R D	
2-6	C R O E		Storage - files		Clear crate		H C P R D	
2-7	C R O E		Storage - files		Brown box		H C P R D	
2-8	C R O E		Storage - files		Yellow box		H C P R D	
2-9	C R O E		Prescription topical - Positex		open dog area		H C P R D	Bag 2

Narrative: \_\_\_\_\_

Reporting ACO <b>B/120</b>	DPSST # <b>Acacs</b>	Date <b>8/11/2020</b>	Time <b>1800</b>
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PROPERTY IS RELEASED BY APPOINTMENT ONLY

CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

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Goldenrod-Receipt Copy

Property Evidence Report: October 2012



Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060  
(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case # <b>40400</b>		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>3</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location		Address		Street		Unit #		City		State		Zip	
		<b>2310 NE 82nd Ave</b>						<b>Portland</b>		<b>OR</b>		<b>97220</b>	
Person Code		V - Victim		O - Owner		S - Suspect		F - Finder		U - Other			
Code:		No.		Last Name		First		Middle		DOB		Sex	
				<b>Worfin</b>		<b>Palooza</b>							
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes**

C - Confiscated O - Other

E - Evidence

**Dispo Codes**

H - Hold C - Crime Lab P - Digital Photo

R - Release to Owner D - Destroy

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
3-1	C R O E		Reception, white <del>flor</del> shelf				H C P R D	3
3-2	C R O E		Unlabeled orange tablets		Open dog area		H C P R D	Bag 3
3-3	C R O E		Unlabeled blue/red capsules		Open dog area		H C P R D	Bag 3
3-4	C R O E		Unlabeled white tablets		Open dog area		H C P R D	Bag 3
3-5	C R O E		Sulfamed Injectable 250ml		Open dog area		H C P R D	Bag 4
3-6	C R O E		Lincomed Injectable 100ml		Open dog area		H C P R D	Bag 4
3-7	C R O E		Tylan Injectable 250 ml		Open dog area		H C P R D	Bag 4
3-8	C R O E		Enroflox Injectable 100mg		Open dog area		H C P R D	Bag 4
3-9	C R O E		Cerenia Injectable <del>20</del> 20 ml		Open dog area		H C P R D	

Narrative: \_\_\_\_\_

Reporting AC <b>AC</b>	DPSST # <b>Acad</b>	Date <b>2/11/2020</b>	Time <b>1800</b>
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CONTACT PROPERTY EVIDENCE AT 503-988-6238 FOR AN APPOINTMENT

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Property Evidence Report: October 2012

Exhibit A  
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Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060  
(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case # <b>40400</b>		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>4</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2310</b>		Address <b>NE 82nd Ave</b>		Street <b>Ave</b>		Unit #		City <b>Portland</b>		State <b>OR</b>		Zip <b>97220</b>	
Person Code <b>V</b> - Victim <b>O</b> - Owner <b>S</b> - Suspect <b>F</b> - Finder <b>U</b> - Other													
Code:		No.		Last Name <b>Woufin</b>		First <b>Palcoza</b>		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

## Property Type Codes

C - Confiscated O - Other

E - Evidence

## Dispo Codes

H - Hold C - Crime Lab P - Digital Photo

R - Release to Owner D - Destroy

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
4-1	C R O E		Tylan Injectable 250 ml		Open	day area	H C P R D	Bag 4
4-2	C R O E		Prescription Pro-Pectalm cream		Open	day area	H C P R D	Bag 1
4-3	C R O E		Prescription <del>Varan</del> Ofloracin topical		Open	day area	H C P R D	Bag 2
4-4	C R O E		Trisul 500 Tablet Bottle		Open	day area	H C P R D	Bag 5
4-5	C R O E		Amoxicillin 500 Tablet Bottle		Open	day area	H C P R D	Bag 5
4-6	C R O E		Amoxicillin 250 tablets Bottle		Open	day area	H C P R D	Bag 5
4-7	C R O E		Cephalexin 500 tablet Bottle		Open	day area	H C P R D	Bag 5
4-8	C R O E		metronidazole 500 tablet bottle		Open	day area	H C P R D	Bag 5
4-9	C R O E		Tyko-tabs 1,000 tablet bottle		Open	day area	H C P R D	Bag 5

Narrative: \_\_\_\_\_

Reporting ACO <b>[Signature]</b>	DPSST # <b>[Signature]</b>	Date <b>12/11/20</b>	Time <b>1:00</b>
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Property Evidence Report: October 2012

Exhibit A  
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Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060  
(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case # <b>40100</b>		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>5</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2310</b>		Address <b>NE 82nd Ave</b>		Street <b>Portland</b>		Unit #		City <b>OR</b>		State <b>97220</b>		Zip	
Person Code V - Victim O - Owner S - Suspect F - Finder U - Other													
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes**

C - Confiscated O - Other

E - Evidence

**Dispo Codes**

H - Hold C - Crime Lab P - Digital Photo

R - Release to Owner D - Destroy

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
5-1	C R O E		Enrofloxacin 250 tablet bottle			open day area	H C P R D	Bag 6
5-2	C R O E		Sulfamethoxazole 500 tablet bottle			open day area	H C P R D	Bag 6
5-3	C R O E		Orbax 250 tablets			open day area	H C P R D	Bag 6
5-4	C R O E		Metronidazole 500 tablets			open day area	H C P R D	Bag 6
5-5	C R O E		Cephalexin 500 tablets			open day area	H C P R D	Bag 6
5-6	C R O E		Amoxicillin 500 tablets			open day area	H C P R D	Bag 6
5-7	C R O E		Metoprolol 500 tablets			open day area	H C P R D	Bag 6
5-8	C R O E		Fish Clindamycin 100 tablet bottle			open day area	H C P R D	Bag 7
5-9	C R O E		Aqua-max 100 tablet bottle			open day area	H C P R D	Bag 7

Narrative: \_\_\_\_\_

Reporting ACC # <b>102</b>	DPSST # <b>102</b>	Date <b>11/10/20</b>	Time <b>12:00</b>
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Property Evidence Report: October 2012

Exhibit A  
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Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060  
(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case # <b>40400</b>		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>6</b>					
Incident Type		Receipt #		Report Date		Report Time		Occurred Date		Occurred Time		Source	
Location <b>2210</b>		Address <b>NE 82nd Ave</b>		Street <b>Ave</b>		Unit #		City <b>Portland</b>		State <b>OR</b>		Zip <b>97220</b>	
Person Code <b>V - Victim</b> <b>O - Owner</b> <b>S - Suspect</b> <b>F - Finder</b> <b>U - Other</b>													
Code:		No.		Last Name <b>Woolfin</b>		First <b>Palooza</b>		Middle		DOB		Sex	
Address		Street <b>2210 NE</b>		Unit # <b>82nd Ave</b>		City <b>Portland</b>		State <b>OR</b>		Zip <b>97220</b>		Phone	
Code:		No.		Last Name		First		Middle		DOB		Sex	
Address		Street		Unit #		City		State		Zip		Phone	

**Property Type Codes****C - Confiscated O - Other****E - Evidence****Dispo Codes****H - Hold C - Crime Lab P - Digital Photo****R - Release to Owner D - Destroy**

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
6-1	C R O E		Fish Clindamycin	100 tablet	bottle	open day area	H C P R D	Bag 7
6-2	C R O E		Fish Cillin	100 tablet	bottle	open day area	H C P R D	Bag 7
6-3	C R O E		Buprenorphine 0.3mg/ml	2 syringes	bottle	open day area	H C P R D	Bag 8
6-4	C R O E		Tramadol Hydrochloride	50 mg	25	the storage closet	H C P R D	Bag 8
6-5	C R O E		Heartworm preventative	- 125 doses		Storage closet	H C P R D	Box 1
6-6	C R O E		Terbinafine 250mg	- 260 tablet	bottle	Storage closet	H C P R D	Bag 9
6-7	C R O E		Clindamycin drops	25mg		Storage closet	H C P R D	Bag 9
6-8	C R O E		Cerenia 16mg			Storage closet	H C P R D	Bag 9
6-9	C R O E		Doxine 100mg	250 tablet		Storage closet	H C P R D	Bag 9

Narrative: \_\_\_\_\_

Reporting ACO <b>[Signature]</b>	DPSST # <b>[Signature]</b>	Date <b>11/1/20</b>	Time <b>1:30</b>
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Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060

(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case # <b>40000</b>		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>7</b>	
Incident Type	Receipt #	Report Date	Report Time	Occurred Date	Occurred Time	Source			
Location	Address	Street	Unit #	City	State	Zip			
	<b>2310 NE 82nd Ave</b>	<b>Portland</b>	<b>OR</b>	<b>97220</b>					
Person Code	V - Victim	O - Owner	S - Suspect	F - Finder	U - Other				
Code:	No.	Last Name	First	Middle	DOB	Sex			
		<b>Wooten</b>	<b>Palooza</b>						
Address	Street	Unit #	City	State	Zip	Phone			
	<b>2310 NE 82nd Ave</b>	<b>Portland</b>	<b>OR</b>	<b>97220</b>					
Code:	No.	Last Name	First	Middle	DOB	Sex			
Address	Street	Unit #	City	State	Zip	Phone			

**Property Type Codes**

C - Confiscated O - Other

E - Evidence

**Dispo Codes**

H - Hold C - Crime Lab P - Digital Photo

R - Release to Owner D - Destroy

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
7-1	C R O E		Citalopram HBR 40 mg 90 tablets			Storage closet	H C P R D	Bag 9
7-2	C R O E		Amitriptyline 10 mg 100 tablets			Storage closet	H C P R D	Bag 9
7-3	C R O E		Meloxicam 7.5 mg 100 tablets			Storage closet	H C P R D	Bag 9
7-4	C R O E		Quellin 25mg 3 ea			Storage closet	H C P R D	Bag 9
7-5	C R O E		Dexamethasone 1mg 13.5 qty			Storage closet	H C P R D	Bag 9
7-6	C R O E		Carprofen 25mg 30 qty bottle			Storage closet	H C P R D	Bag 9
7-7	C R O E		Alprazolam 0.25mg 2 qty			Storage closet	H C P R D	Bag 9
7-8	C R O E		Trazodone HCl 100mg 20 qty			Storage closet	H C P R D	Bag 9
7-9	C R O E		Roxera 75 mg 100 qty			Storage closet	H C P R D	Bag 9

Narrative: \_\_\_\_\_

Reporting ACO <b>AS</b>	DPSST # <b>AS</b>	Date <b>8/11/20</b>	Time <b>8:31</b>
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Goldenrod-Receipt Copy





Dept of Community Services

**MULTNOMAH COUNTY OREGON**

Animal Services Division

P.O. Box 698, 1700 West Historic Columbia River Hwy Troutdale, Oregon 97060  
(503) 988-PETS (7387) Fax (503) 988-3002

MCAS Case # <b>254895</b>		Law Enforcement Case # <b>40400</b>		Accompanying Reports: <input type="checkbox"/> Incident <input type="checkbox"/> Citation <input type="checkbox"/> Accident <input type="checkbox"/> Other <input type="checkbox"/> Special		Copies <input type="checkbox"/> DA		Page # <b>8</b>	
Incident Type	Receipt #	Report Date	Report Time	Occurred Date	Occurred Time	Source			
Location <b>2310 NE 82nd Ave</b>		Address <b>Portland</b>		City <b>OR</b>		State <b>97220</b>		Zip	
Person Code V - Victim O - Owner S - Suspect F - Finder U - Other									
Code:	No.	Last Name <b>Wouth Palaza</b>		First <b>Palaza</b>		Middle		DOB	Sex
Address		Street		Unit #		City		State	Zip
Code:	No.	Last Name		First		Middle		DOB	Sex
Address		Street		Unit #		City		State	Zip

**Property Type Codes**

C - Confiscated O - Other

E - Evidence

**Dispo Codes**

H - Hold C - Crime Lab P - Digital Photo

R - Release to Owner D - Destroy

Exh. No.	Type Code (circle one)	QTY	Item Description	Brand	Color	Model No. / Ser No.	Dispo Code (circle one)	Bin Loc
8-1	C R O E		Mirtazapine 15mg	30 qty	atry bottle	Storage closet	H C P R D	Bag 9
8-2	C R O E		Prednisolone 5mg	25 qty	atry bottle	Storage closet	H C P R D	Bag 9
8-3	C R O E		Gabapentin 300mg	20 qty	atry bottle	Storage closet	H C P R D	Bag 9
8-4	C R O E		Cerenia Injectable 10mg			Storage closet	H C P R D	Bag 11
8-5	C R O E		Unlabeled white tablets			Storage closet	H C P R D	Bag 3
8-6	C R O E		19 ea topical press. meds			Storage closet	H C P R D	Bag 10
8-7	C R O E		2 ea suspension	refrigerated	medications	Reception	H C P R D	Bag 12
8-8	C R O E		3 ea pill bottles	refrigerated	medications	Reception	H C P R D	Bag 12
8-9	C R O E		1 ea Bactracillin 250 ml bottle	Refrigerated	medication	Reception	H C P R D	Bag 12

Narrative: \_\_\_\_\_

Reporting ACO <b>DA</b>	DPSST # <b>DA</b>	Date <b>2/11/2020</b>	Time <b>1840</b>
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Property Evidence Report: October 2012

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